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Name/Address of Attorney or Pro Per	I
YOANA A Kipilov	
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Ontano, CA 91764	THE SEA
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	DISTRICT COURT CT OF CALIFORNIA
YOANA A. Kiprilor PLAINTIFF(S),	CASE NUMBER: 5:16-CV- 009 525 36B (SP)
V. Ne tional Board of Medical Examiners, DEFENDANT(S).	Motion and Affidavit for Leave to Appeal In Forma Pauperis: ☐ 28 U.S.C. 753(f) ☐ 28 U.S.C. 1915
a. New evidence - that has not been taken b. State a claim will the help of an at c. make claiffeations (since there has not	
 a. Are you presently employed? ☐ Yes ► No. If the month and give the name and address of your employ 	e answer is yes, state the amount of your salary or wages per ver. Currently knemployed
employment, or in the form of rent payments, interest	state the amount received from each during the past twelve Sept. 30, 2016 (end of the support).

Case 5:16-6-200952-5055-751/03/24/16nt 12:1104 (16-746) / 14-16-11/0 c. Are you presently employed in prison? ☐ Yes ☐ No. If yes, state the number of hours you work per week and the hourly rate of pay. d. Do you own any cash or do you have money in a checking or savings account? Yes \square No. If the answer is yes, state the amount of money in each account separately as of six (6) months prior to the date of this affidavit. The money from the spousel support was put into my checuing account (which is e. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? No f. In what year did you last file an income tax return? 2015 g. Approximately how much income did your last tax return reflect? \$19,132 (hine teen thousand) one hundred thirty three dollars). h. List the persons who are dependent upon you for support and state your relationship to those persons. none i. State monthly expenses, itemizing the major items. Fent-700 I declare under penalty of perjury that the foregoing is true and correct.

10 / 31 /2016

Signature of Attorney (Disregard if filed in propria persona)